24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA	C C00499020
Check If 24-hour report	on M M / D D / Y Y Y Y Y
Full Name (Last, First, Middle Initial) of Payee Adcoprint.com	Date
Mailing Address 8412 Sabal Industrial Blvd.	08 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code	Amount
Tampa FL 33619	86903.81
	Transaction ID : SE.76957 e Sought: House State: FL Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK Chec	President Sk One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disb	ursement For: Primary General
	Other (specify)
Full Name (Last, First, Middle Initial) of Payee Bill Barnett	Date 08 14 2012
Mailing Address 815 Hallowell Circle	
	Amount
City State Zip Code Orlando FL 32828	337.60 Transaction ID : SE.76954
	e Sought: House State: FL Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK Chec	President Ck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 931.31 Disb 2012	ursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	87241.41
(b) SUBTOTAL of Unitemized Independent Expenditures	1171171171
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Ryan Hecker [Electronically Filed] Date	8 25 2012
Signature	